

Amblyopia (lazy eye): patching, eye drops and keeping on track

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In short

Amblyopia, or lazy eye, is when the vision in one eye does not develop fully in early childhood, so the brain relies on the other eye. Treatment often starts with glasses, then patching or eye drops for the stronger eye, done at home. Sticking to the prescribed hours and coming back for reviews are the parts of treatment you can control.

What amblyopia is

When one eye sends a weaker picture to the brain in early life, the brain starts to ignore that eye. Vision in that eye then does not develop as it should. Usually one eye is affected, and rarely both.

Common causes include:

- An eye that turns in or out (**strabismus**)
- A big difference in prescription between the two eyes
- Astigmatism
- Something blocking vision in one eye, such as a cataract or a drooping eyelid

It usually develops between birth and age 7. It is more common in babies who were small or premature, and in children with a family history of amblyopia.

Signs to look for

- An eye that wanders in or out
- Squinting or shutting one eye

- Tilting the head to look at things
- Trouble judging depth or distance

Many children have no signs at all and do not notice anything wrong. Amblyopia is often first found at an eye test. A child may complain when you cover their stronger eye. That is one reason to have your child's eyes tested before they start school. See our [children's vision](#) page.

How amblyopia is treated

Treatment depends on the cause. It aims to make the brain use the weaker eye while vision is still developing, and it is most successful when started early, ideally before the age of 8.

- **Glasses.** If a prescription is part of the cause, glasses usually come first. Your child wears them as advised, and the patch is usually worn with them.
- **Patching.** A patch covers the stronger eye for a set number of hours each day.
- **Eye drops.** Drops in the stronger eye blur its vision for a time, which encourages the brain to use the weaker eye.
- **Surgery.** If a cataract or drooping eyelid is the cause, surgery may be needed. Surgery for a turned eye straightens the eyes, but it does not improve the vision on its own.

Treatment often takes several weeks or months, and it can continue for up to 2 years.

How many hours of patching

Your optometrist will prescribe the number of hours for your child. Many children are prescribed a few hours a day rather than all day.

Large trials in children aged 3 to 7 found that, for moderate amblyopia, 2 hours of patching a day gave a similar improvement to 6 hours. For severe amblyopia, 6 hours a day gave a similar improvement to full-time patching. In both trials, children also did at least 1 hour of close-up activities each day while patched.

Patching at home

- 1 If your child has glasses, they wear them as advised, with the patch over the stronger eye.
- 2 Pick a regular time each day, so patching becomes part of the routine.
- 3 During patching, plan close-up activities such as drawing, colouring, puzzles, building blocks, reading or games.
- 4 Write down the hours each day and bring the record to your review.
- 5 Keep going for as long as your optometrist advises, even if things seem better. Do not reduce or stop the hours without checking with us first.

If your child has been given eye drops

The drops blur vision in the stronger eye for a time. That is how they work, so it is expected. Some children use them every day and some only on weekends: trials found weekend use gave a similar improvement to daily use in moderate amblyopia. Your optometrist will tell you which plan suits your child.

- 1 Use the drops exactly as prescribed, in the stronger eye only.
- 2 Wash your hands before and after.
- 3 Store the bottle as the label says, out of reach of children.
- 4 Tell us about any side effects.

Reviews

Your first review is often around 2 to 3 months after treatment starts. At each review we check the vision in both eyes, how patching or drops are going, and any side effects. We then adjust the plan.

Amblyopia comes back after treatment in around 1 in 4 people. Regular eye checks continue after treatment ends, even when vision looks good.

When to call us on (03) 9702 9118

- Your child refuses the patch or drops most days
- The vision in the stronger eye seems blurred
- An eye starts to turn, or turns more often
- The eyes are red or sore after drops
- Glasses are lost or broken

Call (03) 9702 9118

To book a children's eye test, book online or call us on (03) 9702 9118.

FAQs

— Does a lazy eye go away on its own?

No. Without treatment, amblyopia can lead to lasting vision loss in the affected eye. Treatment is most successful when started early, ideally before the age of 8.

— Is a lazy eye the same as a turned eye?

Not quite. A lazy eye means vision in one eye has not developed fully. A turned eye (**strabismus**) is one common cause of it, but a lazy eye can look completely normal.

— How long does patching take?

It varies from child to child. Treatment often takes several weeks or months and can continue for up to 2 years. Your optometrist will review progress along the way.

— What if my child will not wear the patch?

Tell us. We can talk through ways to fit it into the day, and eye drops that blur the stronger eye are another option for some children.